



**Statement of Travis Horr**  
**Director, Government Affairs**  
*of*  
**Iraq and Afghanistan Veterans of America**  
*before a hearing of the*  
**House Veterans' Affairs Committees**  
**May 5, 2021**

Chairman Takano, Ranking Member Bost, and distinguished members of the Committee, on behalf of Iraq and Afghanistan Veterans of America (IAVA) and our more than 425,000 members, I would like to thank you for the opportunity to submit our statement for today's hearing on one of IAVA's top priorities for the 117th Congress, addressing injuries from burn pits and other toxic exposures.

Year after year, the concern grows surrounding the health impacts of burn pits and toxic exposures in recent conflicts. Burn pits were a common way to get rid of waste at military sites in Iraq and Afghanistan, particularly between 2001 and 2010. The effect of burn pits is not just the chemicals in the smoke, but the particulate matter these men and women breathed in from the ashes and dust from the fires themselves.

According to IAVA's most recent member survey, 86% of IAVA members were exposed to burn pits during their deployments and over 88% of those exposed believe they already have or may have symptoms.

Like many of our members, I was exposed to a burn pit on a daily basis during my seven month deployment to Afghanistan. The burn pit was an all too common feature in our small squad sized patrol base in Southern Helmand Province. I had the responsibility of keeping the burn pit burning. At the end of almost everyday I would take roughly half a gallon of jet fuel and spread it around the burn pit. I would then take a piece of cardboard, also covered in jet fuel, light it on fire, and throw it in to light the burn pit. The burn pit on my small patrol base was not unique. Our infantry company was spread across 13 different patrol bases in our area of operations, and all had a similar burn pit. It was the only way we were able to dispose of our trash, which included plastics from water bottles and MREs, food waste, human waste, as there was no plumbing, animal carcasses, batteries, and spent ammunition. All of it was put together in a six foot deep pit and set on fire with jet fuel on a daily basis. It was an all too normal and mundane part of my deployment. We were never warned of any health effects or to try and keep our distance, as difficult as that would have been in a base smaller than half a football field. Like many things during our deployment, it was just something to accept and move on. Ten years



later, I feel extremely fortunate not to have any noticeable health effects due to this exposure. However, I am no longer naive to believe that will always be the case. IAVA thanks the Committee for holding this important hearing and considering a large number of bills that will address not only veterans that have been exposed to burn pits, but also Vietnam era veterans who are still denied exposure to Agent Orange, or veterans from other eras that were exposed to dangerous radiation.

There are other hazards beyond burn pits that occurred in Iraq and Afghanistan that may pose danger for respiratory illnesses including human waste, irritant gases, high levels of fine dust, heavy metals in urban environments, explosives and depleted uranium used in munitions. Without due attention, this issue may become the Agent Orange of the post-9/11 era of veterans, with veterans waiting decades for closure and care. It is past time that comprehensive action is taken to address the growing concern that these exposures have had severe impacts on veterans' long term health.

For many that feel they are suffering from their exposure to burn pits or other toxic exposures, accessing quality care can be a challenge. At VA, barriers to care are even more apparent, as the VA does not fully recognize claims connecting injury or illness to burn pit exposure. According to the VA 72% of disability claims for toxic exposures are still being denied.

Like those who fought for recognition of the effects of Agent Orange, the hope for those exposed to burn pits and other toxic exposures is that they will one day be able to claim certain illnesses and injuries as presumptive service-connected illnesses or injuries due to their exposure. Until the VA recognizes the damage toxic exposures like burn pits had on the health of those who served around them, access to VA benefits and health care will be challenging.

For these reasons, IAVA is extremely supportive of passing into law this year the *Toxic Exposures in the American Military (TEAM) Act* (H.R. 2127), the *Presumptive Benefits for War Fighters Exposed to Burn Pits and Other Toxins Act - "War Fighters Act"* (H.R. 2372), and the *Veterans Burn Pits Exposure Recognition Act* (H.R. 2436). IAVA believes that these bills are crucial for veterans that have been exposed to burn pits and other toxic exposures and have made a presumptive service connection to provide disability and healthcare benefits a centerpiece of our campaign to support servicemembers that have been exposed.

The *War Fighters Act* is incredibly important landmark legislation which will create a presumption of service-connection for illnesses of veterans that have deployed since 1990, such as respiratory diseases or cancers. This legislation is needed for those veterans that are sick and dying and unable to prove that their health problems are service related. This legislation would ensure that we do not repeat past mistakes when it comes to veterans that have toxic exposures. Creating a presumptive benefit for veterans who are suffering would remove the burden of proof



that a burn pit or overseas toxic exposure is the direct cause of their illness. Many veterans might not become sick for years after their exposure, making their claims process more complicated and proving a direct link to their illness incredibly difficult. Additionally, due to the nature of these exposures and where they occurred, it is unrealistic to believe that a 100% link will ever be established between such a wide array of toxic exposures and a growing number of illnesses. This is why we must ensure that those who are currently ill have access to the benefits and health care that they deserve. Any final toxic exposures legislation absolutely *must* have the presumptive service connection that the Warfighters Act would establish.

The *TEAM Act* will ensure that all veterans are able to access high quality VA care for any toxic related issues. This protects veterans that may be waiting on a disability claim from VA, or those that are not yet sick, and receive the care that they deserve. By significantly expanding the eligibility of VA health care to cover veterans that have been exposed to toxins, both foreign and domestic, we can ensure that no veteran falls through the cracks again. In addition to providing health care for veterans, this legislation would also create a framework for an independent commission to establish presumptive conditions for veterans that will cover all toxic exposures, both foreign and domestic, into the future. This will protect future generations of veterans in the future from exposures that are impossible to predict today. IAVA was proud to join with our VSO allies in the TEAM Coalition and our Congressional partners to introduce this legislation and we are committed to seeing its passage by the end of the 117th Congress.

Additionally, while both of these bills will help veterans that have been exposed to toxic exposures, they will also increase studies done on these exposures to help both veterans and health care professionals. While 100% direct links of toxic exposure to certain illnesses may be challenging to establish, increased research can help determine veterans and their health care providers with valuable information that could save lives.

The *Veterans Burn Pits Exposure Recognition Act* is another critically important piece of legislation in order to address toxic exposures. This bill would finally concede exposure to over 50 chemicals for all veterans that have served in areas where burn pits were widely used. This will finally give those veterans relief who are unable to prove any exposure due to the absence of records of exposure. IAVA fully supports this legislation and believes it must be included in any final toxic exposure legislation.

Additionally, the *Conceding Our Veterans' Exposures Now and Necessitating Training (COVENANT) Act* (H.R. 2368) would create a comprehensive list of presumptive illnesses for veterans that have served in a designated location overseas. This legislation would also concede exposure to a number of chemicals in order to help veterans file their claims and remove the burden of proof that may not exist due to poor record keeping from the Department of Defense



(DoD). IAVA is supportive of this measure as another path to ensure that all veterans that have been exposed are able to receive health care and benefits from VA.

The *Fairly Assessing Service-related Toxic Exposure Residuals (FASTER) Presumptions Act* (H.R. 2607) would create a new review process for presumptive illnesses and toxic exposures by creating a formal advisory committee, a science review board, and a working group with the aim of having faster decisions on presumptive illnesses. Frameworks like these are important to both veterans and servicemembers that have already been exposed, as well as veterans in the future. IAVA believes that we must have a working framework for presumptive illnesses and toxic exposures in order to protect future generations of veterans that will be exposed to toxins that we are unable to account for today. This will protect those future generations from continuing to advocate in front of Congress, oftentimes decades after exposure, just to ensure that they are able to get the health care and benefits that they earned through their service. It is for these reasons that IAVA supports this legislation.

The *K2 Veterans Care Act* (H.R. 1355) would ensure that veterans that have served at Karshi-Khanabad Air Base, or K2, can finally receive a presumption of illness due to that service. K2 veterans were exposed to a plethora of toxins, including known cancer-inducing toxins, yet are still denied from a presumption of illness. These barriers to care make it difficult to receive a disability claim, for many of the same reasons as those exposed to burn pits. IAVA thanks the Committee for including K2 veterans on the list of bills on the agenda today and is fully supportive of this legislation.

Both the *PFAS Registry Act* (H.R. 2742) and the *Fort McClellan Health Registry Act* (H.R. 2825), would create new registries at VA to increase tracking of veterans that were exposed to toxins. IAVA has long been a proponent of registries and were extremely supportive of the current burn pits registry at VA. These tools can help VA track exposures and illnesses. IAVA is supportive of these two pieces of legislation and also implores VA to ensure that these registries are well advertised and actively reach out to veterans that are eligible. Registries are only as good as the data that is given by veterans, and proper reach-out to veterans is critical.

IAVA, our VSO allies, and many members of this committee have been on the forefront of toxic exposure issues for years. It is thanks to that work that the VA Airborne Hazards and Open Burn Pit Registry has continued to increase in the number of registration, giving VA crucial information on their symptoms. Important legislation has been passed in recent years that strengthens that registry, like the IAVA-backed *Burn Pits Accountability Act*, and other legislation that will increase tracking, reporting, and researching these exposures. However, more must be done to help those that are suffering from their illnesses due to exposure now. Those that have been exposed and are sick need access to the life-saving resources that VA offers. IAVA will



continue to fight until they have access to the health care and benefits that they rightfully deserve.

IAVA believes that both the aforementioned bills will complement each other to ensure that veterans are protected, and are able to get the health care and disability benefits that they deserve. They will also create incredibly important frameworks to ensure that veterans are protected from future exposure. We also support legislative efforts to provide government transparency into what servicemembers were exposed to during their deployments, as well as improved data tracking, and research into causes and cures for related illnesses.

IAVA is also supportive of a number of bills on the agenda today to continue to address Vietnam veterans that were exposed to Agent Orange. The *Keeping Our Promises Act* (H.R. 2268), *Veterans Agent Orange Exposure Equity Act* (H.R.2569), *Vietnam Veterans Liver Fluke Study Act* (H.R. 1273), and the *Fair Care for Vietnam Veterans Act* (H.R. 1972) will continue to expand and deliver benefits and health care to Vietnam era veterans, as well as increase the research done on the effects of Agent Orange. These veterans have waited entirely too long to receive the care that they rightfully deserve and IAVA is proud to support them.

The *Mark Takai Atomic Veterans Healthcare Parity Act* (H.R. 1585), which would give those veterans who participated in the cleanup of Enewetak Atoll in the Marshall Islands a presumption of radiation exposure. This legislation is in line with IAVA's effort to remove the burden of proof from veterans to prove their exposure. The *Enewetak Atoll Cleanup Radiation Study Act* (H.R. 2530) will have the National Academies of Sciences, Engineering, and Medicine conduct a study on veterans that participated in the cleanup. IAVA encourages additional research into the health effects and exposures that those veterans were exposed to, however we also do not believe that these veterans that are sick now should wait for that study. It is for those reasons that IAVA supports both of these pieces of legislation.

The *Palomares Veterans Act* (H.R. 2580) would allow a presumption of illness and disability compensation to veterans that served in the cleanup of the Palomares nuclear accident in 1966. Servicemembers had been sent to the site to conduct a cleanup without proper protective gear and were subjected to radiation exposure. This presumption of illness would offer relief for those veterans that are still unable to get disability claims or health care due to a lack of service-connection and this legislation would rightfully correct that. It is for those reasons that IAVA is supportive of this bill.

Members of the Committee, thank you again for the opportunity to share IAVA's views on these issues today. I look forward to answering any questions you may have and working with the Committee in the future.



**Biography of Travis Horr:**

Travis Horr serves as the Director of Government Affairs, working to advance IAVA's advocacy efforts in Washington, D.C. Prior to IAVA, he worked at a strategy consulting firm, as well as political campaigns in both Maine and Delaware. Travis served in the Marine Corps Infantry for four years and was stationed at Marine Barracks 8th & I in Washington D.C., and Camp Pendleton, CA. He deployed to Helmand Province, Afghanistan in 2010 in support of OEF. Travis is a Maine native and graduated from the University of Southern Maine with a B.A. in Political Science with Honors utilizing the Post-9/11 GI Bill.